

2018 BUILDING PERMIT APPLICATION  
VILLAGE OF SLINGER  
300 SLINGER ROAD, SLINGER WI 53086  
ATTN: BUILDING INSPECTION  
PHONE (262) 644-5265 Ext. 107 Fax (262) 644-6341

PERMIT # \_\_\_\_\_

TAX KEY # \_\_\_\_\_

Owner's Name & Address: \_\_\_\_\_

Owners Phone # \_\_\_\_\_ Project Address: \_\_\_\_\_

Contractor Name & Address: \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Email: \_\_\_\_\_

UDC Lic Cert # & Expiration: \_\_\_\_\_ DCQ Lic Cert # & Expiration \_\_\_\_\_

**Principal Building Information**

Type of Building \_\_\_\_\_

Proposed Use \_\_\_\_\_

Cost of Project \_\_\_\_\_

Septic Permit # \_\_\_\_\_

Type of Heat \_\_\_\_\_ Fuel \_\_\_\_\_

Air Conditioner Yes \_\_\_\_\_ No \_\_\_\_\_

Submit:

3 Sets of Complete Building Plans

1 Set of Energy Calculations

3 Copies of Survey - Where House has been  
staked by surveyor & also showing the

Erosion Control Location & Tracking Pad

Culvert Location Staked

**The undersigned hereby attest that the above information and attachments hereto are true and correct.**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*\*\*FOR OFFICE USE ONLY\*\*\*\*\*

Shoreland \_\_\_\_\_

Zoning District \_\_\_\_\_

Basement \_\_\_\_\_

Occup \_\_\_\_\_

Plan \_\_\_\_\_

Area \_\_\_\_\_

Heating \_\_\_\_\_

Insp \_\_\_\_\_

Flood/Wetland

Yes \_\_\_\_ No \_\_\_\_

Garage \_\_\_\_\_

Air \_\_\_\_\_

Seal \_\_\_\_\_

**State-Plans Submitted**

Site Built \_\_\_\_

Zoning \_\_\_\_\_

Other \_\_\_\_\_

Building \_\_\_\_\_

Manufactured \_\_\_\_\_

Erosion \_\_\_\_\_

**TOTAL** \_\_\_\_\_

HVAC \_\_\_\_\_

Plumbing \_\_\_\_\_

\_\_\_\_ Story

***\*Double Fee for Work Done Before Permit***

Lighting \_\_\_\_\_

A - D Garage